

# MONTANA CHEMICAL DEPENDENCY CENTER POLICY AND PROCEDURE MANUAL

Policy Subject: Patient Grievance Committee	
Policy Number: CTP 13	Standards/Statutes: ARM 37.27.120
Effective Date: 01/01/02	Page 1 of 2

**PURPOSE:** To describe the Patient Grievance Committee (PGC) and procedures used to evaluate allegations of patient right violations.

**POLICY:** The PGC will be utilized when resolution to a patient's grievance is not resolved at a less formal level.

**PROCEDURE:**

- I. The PGC is responsible for reviewing and responding to patient grievances, recommending action within the context of the program policies, enforcing time frames and oversight of the Patient Grievance Procedure.
  - A. The PGC is comprised of two management staff, one other staff, two patient representatives, (peer leaders) and chaired by the Clinical Supervisor (In the event that the grievance is against the Chair Person, the Chair Person will reclude themselves and the order following will be the Chair Person for reviewing patient grievances: PIURM, Mental Health Supervisor, Personnel Specialist).
  - B. All grievances will be reviewed by the Administrator and the Performance Improvement Utilization Review Manager and documentation of those reviews will be kept with the original grievance form
- II. All efforts to resolve the issue informally between the patient and staff should be exhausted prior to a formal written grievance being initiated.
  - A. If resolution at the informal level is not accomplished, a Patient Grievance Form should be completed and presented to the Chair of the PGC; grievance forms May be obtained from any staff.
  - B. The Chair of the PGC will review the grievance and within five working days attempt to resolve

- Revisions: Revision # 1, Rona R. McOmber, PIURM 12/2002

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